## Missouri Department of Transportation

Name of Firm:



105 West Capitol Avenue P.O. Box 270 Jefferson City, MO 65102 (573) 751-2551 Fax (573) 751-6555 www.modot.state.mo.us

Henry Hungerbeeler, Director

## **DISADVANTAGED BUSINESS ENTERPRISE ANNUAL UPDATE**

This annual update form is required by MoDOT in order to keep your DBE eligibility status. When submitting this form your are <u>required</u> to enclose your previous years Federal Income Tax Returns, and any other documentation that supports the reported changes on this form.

## **GENERAL INFORMATION**

Street Address:										
Mailing Address:										
City:		State: Zip:								
Owner of Firm:		Telephone Number:								
Describe the primary but	siness activity	of the firm:		10	лерноне	Numbe	<i>.</i>			
December and primary sur	0000 40	, or all min								
Person preparing this ap	plication:						Title:			
		OWNER	SHIP							
Items such as amendmer changes in management information concerning th <b>Attach additional sheets</b>	personnel or e control and	corporate officers ownership of the	, etc. sho	ould be e	nclosed.	Note:	failure to	o disclos		
Have there been any changes in the ownership structure of the company in the past year?  YES  NO								NO		
Please check what struc					•					
Sole Proprietorship Partnership Corporation Other										
List equipment purchased or leased in Type of Equipment		the past year with Make					Acquired Present Value			
List five largest contracts	completed in	past year.								
Owner/Contractor	Phone	Contract Amount Project		ject Nam	ect Name/Location		Type of Work		Performed	
	PERS	ONAL NET WOR	TH INFO	RMATIO	ON					
Have you acquired any pe	ersonal asset	s or liabilities in th	ne last ye	ar? Y	ES N	Ю				
If answered "YES", list de	etails below:	Note: Attach pro			ssets or l	<u>iabilitie</u>	<u>es.</u>			
Description /	Acquired/Sold	Names on As	on Assets Liabilities Against Asset Value of Asset					of Asset		

## **CERTIFICATION AFFIDAVIT**

State of	CERTIFICATION AFFIDAVII
State of	) ) ss.
County of	·
We, the undersigned o	fficers of the afore-mentioned firm agree to the following conditions:
To abide by all of the ru	les and regulations governing the certification process hereafter.
(Note: If, after filing thi management of this fire	nt within thirty days of any change in the ownership, control, management or status as an on-going concern. It is annual update, and prior to the expiration of your certification, there is any change in the ownership and/or in, you must notify the Missouri Highway and Transportation Department in writing within thirty days after the apply with this requirement may lead to a loss of certification.)
books and review conf	as the right to conduct an on-site review of the firm's operations, as well as, audit and examine the company's racts, company structure, facilities and to request whatever additional information it deems necessary from o monitor the status of the company, if the firm is certified by the department as a bona-fide disadvantaged company.
include all material and	signed, swear under oath, the foregoing statements and application contents are true and complete, and information necessary to identify the firm as a Disadvantage Business Enterprise with the Missouri ortation, as well as identifying all current owners, directors, officers, or members of the firm.
	ay automatically deny or rescind certification after applying its own procedures and may automatically deny f, during or after the certification process, it finds that the undersigned have submitted false, inaccurate, or
as well as any contract Missouri civil and/or cri	or misrepresentation will be grounds for terminating the eligibility of this firm as a certified or qualified DBE, which may have been awarded under those programs, and for initiating action under Federal and/or minal laws concerning false affidavits, false statements or declarations, perjury, fraud, stealing by deceit, or es. (Making a false affidavit is a misdemeanor. See Section 575.050, RsMo 1986.)
*Signature	*Signature
Printed name	Printed name
Title	Title
Date	Date
*Must be signed by at Sole Proprietorship.	least one officer if a corporation; one disadvantaged partner if a Partnership; or the proprietor if a
	NOTARY PUBLIC
On this day of	, 19, before me appeared
and	who, being duly sworn, did execute the fore-going affidavit, and did state
they were properly aut	horized by the above-named DBE firm to execute this affidavit, and that they did so as their free
act and deed.	
Signed,	, Notary Public.
My Commission expire	s: